



07-03-06

PTO/SB/31 (04-05)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

AF
JFW

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 20052/1200522-US1						
In re Application of Randolph J. Noelle et al.								
<table border="1"> <tr> <td>Application Number 09/835,126</td> <td>Filed April 16, 2001</td> </tr> <tr> <td colspan="2">For EX VIVO TREATMENT OF ALLOGENEIC AND XENOGENEIC DONOR T-CELLS CONTAINING COMPOSITIONS (BONE MARROW) USING gp39 ANTAGONISTS AND USE THEREOF</td> </tr> <tr> <td>Art Unit 1644</td> <td>Examiner P. Gabel</td> </tr> </table>			Application Number 09/835,126	Filed April 16, 2001	For EX VIVO TREATMENT OF ALLOGENEIC AND XENOGENEIC DONOR T-CELLS CONTAINING COMPOSITIONS (BONE MARROW) USING gp39 ANTAGONISTS AND USE THEREOF		Art Unit 1644	Examiner P. Gabel
Application Number 09/835,126	Filed April 16, 2001							
For EX VIVO TREATMENT OF ALLOGENEIC AND XENOGENEIC DONOR T-CELLS CONTAINING COMPOSITIONS (BONE MARROW) USING gp39 ANTAGONISTS AND USE THEREOF								
Art Unit 1644	Examiner P. Gabel							
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) <u>\$ 500.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <u>\$ _____</u></p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>04-0100</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p>								
<p>I am the</p> <p><input type="checkbox"/> applicant /inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>57,895</u></p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____</p>								
<p> Signature</p> <p><u>Chandra Garry</u> Typed or printed name</p> <p><u>(212) 527-7700</u> Telephone number</p> <p><u>June 30, 2006</u> Date</p>								
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</p>								
<p><input type="checkbox"/> *Total of <u>1</u> forms are submitted.</p>								

07/05/2006 CCHAU1 00000093 09835126

01 FC:1401

500.00 0P